



DEPARTMENT OF THE NAVY

NAVAL HOSPITAL

BOX 788250

MARINE CORPS AIR GROUND COMBAT CENTER

TWENTYNINE PALMS, CALIFORNIA 92278-8250

IN REPLY REFER TO:

NAVHOSP29PALMSINST 6320.20B

Code 0305

8 May 1997

NAVAL HOSPITAL TWENTYNINE PALMS INSTRUCTION 6320.20B

From: Commanding Officer

Subj: SUTURE POLICY FOR NON-PRIVILEGED HEALTH CARE PROVIDERS

Ref: (a) MANMED CH 9
(b) SECNAVINST 1806.80
(c) OPNAVINST 6400.1A
(d) BUMEDINST 1806.8D

Encl: (1) Suture Certification Worksheet, NAVHOSP29PALMS
Form 6320/20

1. Purpose. Under certain circumstances, it is prudent to permit Medical Department personnel other than privileged members of the Medical Staff (hereafter referred to as privileged providers) to close skin lacerations by suturing. This practice enhances the delivery of health care by allowing privileged providers to attend to patients requiring more urgent care.

2. Cancellation. NAVHOSP29PALMSINST 6320.20A.

3. Policy

a. Qualifications. Personnel may close skin lacerations after having completed the suture certification class, and after demonstrating three (3) proper skin laceration closures. Skin lacerations closure training will include:

(1) Completion in a course that covers: universal precautions, infection control techniques, wound assessment, appropriate wound care techniques, proper completion of various surgical knots, and knowledge of potential complications secondary to suturing.

(2) A medical staff member shall document skin laceration training closures on a suturing checklist, enclosure (1) which upon completion will be forwarded to the Head, Emergency Medicine Department for review.

b. Responsibility. The privileged provider is ultimately responsible for the treatment of the patient and must be judicious in delegating elements of patient care, including suturing, to Hospital Corps personnel. The attending physician

must inspect the laceration before and after repair. Additionally, the physician must be readily accessible should complications arise.

c. Limitations. Personnel may not be directed to close skin lacerations independently until they have been suture certified by the Head, Emergency Medicine Department. As per HMCS Sanderson from the Office of the Surgeon General there is no direct policy or instruction, references (a-d), stating who or what, non-privileged health care providers may or may not suture. Any limitations, restrictions or exceptions are left up to the discretion of the commanding officer.

d. Physician supervision. Non-privileged Health Care Providers, under physician supervision may, suture wounds which:

- (1) Involve the hands, feet, or facial area (scalp excluded).
- (2) Involve lacerations that occur over flexor surfaces, i.e., knee, elbow.
- (3) Involve nerve, tendons, or vascular compromise.
- (4) Were caused by human or animal bites.
- (5) Require subcutaneous repair.
- (6) Are infected or are near sites of infection.
- (7) Are associated with fractures.
- (8) Are present on combative patients.
- (9) If any patient, active duty, dependent, retired or civilian, objects to suture repair by a non-physician member of the staff, the supervising physician will proceed with the treatment.

4. Action

a. The Head, Emergency Medicine Department shall:

- (1) Maintain a curriculum for a comprehensive suture certification class, with the assistance of the Head, Education and Training Department.
- (2) Conduct suture certification training.

(3) Be the sole authority for suture certification of personnel, ensuring that personnel are not certified until they have demonstrated technical suturing competence. (In the absence of the Department Head, this function may be done by the acting, physician, Department Head.)

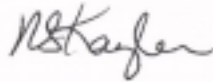
(4) Forward completed enclosure (1) to Education and Training Department. Once data is entered into SPMS enclosure (1) is returned for inclusion in competency files.

b. Head, Education and Training Department shall:

(1) Ensure that SPMS training record reflect the completion of suture certification training.

(2) Include in the Education and Training Department yearly and monthly training calendar dates, time and location of suture training.

5. Forms. The Suture Certification Worksheet, NAVHOSP29PALMS Form 6320/20 is available at Central Files.



R. S. KAYLER

Distribution:
List A

SUTURE CERTIFICATION WORKSHEET
NAVAL HOSPITAL TWENTYNINE PALMS

NAME _____
(Last, First, MI) (Rank) (SSN)

1. The maintenance of this record is the member's responsibility. Loss will necessitate the repetition of all goals formerly attained.

2. All suturing must be directly supervised and documented by a physician.

3. Upon completion of all requirements, this worksheet is to be returned to the Education and Training Department.

	DATE	SIGNATURE
4. Attend lecture/class on suture certification.	_____	_____
5. Score 80% or better on suture certification test.	_____	_____
6. Attend and participate in the suture laboratory/practicum.	_____	_____
7. Closure of three (3) wounds supervised by a physician.	_____	_____
	_____	_____
	_____	_____

8. I have completed the required training and feel I am capable of performing the skills related to wound closure as directed by command/department policy.

(Signature) (Date)

9. The above named individual is qualified to independently suture wounds within the constraints of this command/department policy. This certification should remain in effect while individual is attached to this Command

(Signature) (Date)